

ABSTRAK

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Analisis Kepatuhan dalam Kelengkapan dan Ketepatan Waktu Pelaporan Penanggungjawab Program Pencegahan Penyakit dan Penyehatan Lingkungan di Puskesmas Kabupaten Kepulauan Yapen

xii + 143 halaman + 4 tabel + 3 gambar + 16 lampiran

Pelaporan program P2PL di Puskesmas Kabupaten Kepulauan Yapen selama dua tahun berturut-turut mengalami penurunan dari segi kelengkapan tahun 2010 (20,6%) dan 2011 (15,1%), sedangkan ketepatan waktu tahun 2010 (12,2%) dan 2011 (8,9%). Tujuan penelitian ini adalah menjelaskan faktor-faktor yang terkait dengan kepatuhan dalam kelengkapan dan ketepatan waktu pelaporan penanggungjawab program P2PL di puskesmas Kabupaten Kepulauan Yapen

Jenis penelitian ini adalah deskriptif kualitatif dengan pendekatan waktu *cross sectional*. Pengumpulan data dilakukan dengan tehnik wawancara mendalam (*Indepth Interview*) pada 14 penanggungjawab laporan program P2PL sebagai informan utama, dua Kepala Puskesmas dan seorang Kabid Pengendalian Masalah Kesehatan sebagai informan triangulasi. Analisa data menggunakan metode analisis isi (*content analysis*).

Hasil dari penelitian menunjukkan pengetahuan sebagian besar penanggungjawab laporan, belum mampu menjabarkan terkait kelengkapan pengisian format laporan dan ketepatan waktu pelaporan ke Dinas Kesehatan Kabupaten dikarenakan adanya perubahan format laporan sehingga terjadi perbedaan persepsi pemahaman dan adanya perbedaan pemahaman tanggal penyampaian pelaporan ke Dinas Kesehatan Kabupaten. Sikap yang ditunjukkan, sebagian besar penanggungjawab laporan mempunyai tanggapan positif, dimana sudah mau menjalankan tugasnya dengan senang hati. Semua penanggungjawab laporan termotivasi melengkapi pengisian format laporan dan menyampaikan pelaporan ke Dinas Kesehatan Kabupaten sesuai jadwal karena merasa memiliki tanggungjawab akan tugas yang diberikan. Pembinaan yang dilakukan oleh Kepala Puskesmas dan Dinas Kesehatan Kabupaten belum pernah ada terkait kelengkapan pengisian format laporan dan ketepatan waktu pelaporan, hal ini karena Kepala Puskesmas lebih mempercayakan kepada semua penanggungjawab laporan karena sudah lama bertugas sebagai pembuat laporan dan dari Dinas Kesehatan Kabupaten masalah dana tidak ada. Sebagian besar penanggungjawab laporan belum mematuhi terkait kelengkapan pengisian secara lengkap dan ketepatan waktu, kendalanya belum memahami format laporan karena adanya perubahan format, format tidak didistribusikan ke semua penanggungjawab laporan, dan belum ada mekanisme proses pengumpulan pelaporan ke Dinas Kesehatan Kabupaten.

Berdasarkan hasil penelitian disarankan kepada Dinas Kesehatan Kabupaten memberikan sosialisasi kepada penanggungjawab laporan program P2PL terhadap perubahan format laporan program P2PL dan menyediakan format laporan program P2PL dalam jumlah yang cukup, sedangkan kepada Kepala Puskesmas disarankan mendistribusikan format laporan ke semua penanggungjawab laporan program P2PL

Kata Kunci : Kepatuhan, Laporan program P2PL di puskesmas.
Kepustakaan : 43 (1997 – 2011)

ABSTRACT

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Analysis on the Compliance of Completeness and Timeliness of Reports in Disease Prevention and Environmental Sanitation Program at the Primary Healthcare Centers in Yapen Island District

xii + 143 pages + 4 tables + 3 figures + 16 enclosures

Completeness of disease control and environmental health (P2PL) program report in the primary healthcare centers of Yapen archipelago district decreased during the last two years, 2010 (20.%) and 2011 (15.1%). In addition, report time accurateness in 2010 was 12.2% and in 2011 was 8.9%. The study objective was to explain factors related to the obedience in submitting a complete and an accurate time report by primary healthcare center P2PL program leaders in the primary healthcare centers of Yapen archipelago district.

This was a descriptive qualitative study with cross sectional approach. Data collection was done through interview using in-depth interview technique to 14 P2PL program leaders as main informants. Two heads of primary healthcare centers and one head of the health problem control section were the triangulation informants. Data were analyzed by applying content analysis method.

Results of the study showed that majority of people responsible for the reports were not able to describe the meaning of completeness of report format filling and time accurateness in submitting the report to the district health office. This was caused by changing in the report format; therefore, different perception on understanding the completeness of the report and different understanding on the date for submitting the report to the district health office occurred. The majority of people responsible for the reports had positive attitude. They did their job happily. All people responsible for the reports had good motivation to complete the report format and submit it according to the time schedule. They had responsibility to their job. No assistance and supervision related to the completeness of report format filling and time accurateness of submitting the report had been done by the head of primary healthcare center and district health office. The head of puskesmas gave all responsibility to make reports to people who were responsible for that because they had experience on that task. Problem faced by the district health office was no funding. The majority of people responsible for the report did not complete filling the report and submit on time. The constraints were that they had not understood the report format due to changing the format; format had not distributed to all people responsible for the report, and no mechanism of report collection process to the district health office.

Based on the study results, it is suggested to the district health office to conduct socialization to people responsible for P2PL report regarding changing of the P2PL report format, to provide sufficient number of P2PL report forms. Suggestion for the head of primary healthcare office is to distribute report forms to all people responsible for P2PL report.

Key words : obedience, P2PL program report in the primary healthcare center
Bibliography : 43 (1997-2011)